ADDI-

TIONAL

FEE

RATE

X\$18=

X80=

+270=

ADDIT. FEE

								_				
PATENT APPLICATION FEE DETERMINATION RECORD Effective October 1, 2000								plication or Docket Number				
									19835702			
		CLAIMS AS	(Column		(Colu	mn 2)	SMALI	EN	ITITY	OR	OTHER SMALL I	•
то	TAL CLAIMS						RAT	Ē	FEE		RATE	FEE
FOR			NUMBER FILED		NUMBER EXTRA		BASIC	FEE	355.00	OR	BASIC FEE	710.00
TOTAL CHARGEABLE CLAIMS			<b>20</b> minus 20=		•		X\$ 9	=		OR	X\$18=	
INDEPENDENT CLAIMS			→ minus 3 =				X40	_		OR	X80=	
MULTIPLE DEPENDENT CLAIM P			RESENT				+135	:=		OR	+270=	
*/In the difference in column 1 is less than zero, enter "0" in column 2							TOT	_		OR	TOTAL	310
CLAIMS AS AMENDED - PART II				(Column 3)		OTHE			OTHER	R THAN L ENTITY		
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER OUSLY	PRESENT EXTRA	RAT	Ε	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	.20	Minus	.2	0	z	X\$ 9	=		OR	X\$18=	
	Independent	· 2)	Minus		)	=	X40	=		OR	X80=	
I	FIRST PRESENTATION OF MULTIPLE DEPENDENT				T CLAIM	لللا	+135	<u>-</u>		OR	+270=	
							TC ADDIT.	TAL		OR	TOTAL ADDIT, FEE	
		(Column 1)			mn 2)	(Column 3)						
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		NUA PREVI	HEST MBER OUSLY FOR	PRESENT EXTRA	RAT	E	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	•	Minus	••		=	X\$ 9	}=		OR	X\$18=	
	Independent	•	Minus	•••		=	X40	)=		OR	X80=	
	FIRST PRESE	NTATION OF M	ULTIPLE DEI	PENDEN	T CLAIM		+13	 5		OR	+270=	
								)TAL		┨	TOTAL	
							ADDIT.			JOB	ADDIT. FEE	

		(Column 1)		(Column 2)	(Column 3)					
ENTC		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA					
AMENDMENT	Total	•	Minus	••	=					
	Independent	•	Minus		-					
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM									

\* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

FORM PTO-875 (Rev. 8/00)

Patent and Trademark Office, U.S. DEPARTMENT OF COMMERCE 'U.S. GPO: 2000-460-706/30103

OR

OR

OR

RATE

X\$ 9=

X40=

+135=

ADDIT. FEE

TOTAL

ADDI-

TIONAL

FEE

<sup>&</sup>quot;If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."
"If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."